	PAIENI	APPL				ERMINA r 10, 19		N RECC	RD		09/	33 c	769		
CLAIMS AS FILED - PART I (Column 1) (Column 2)										SMALL ENTITY OTHER TH. TYPE OR SMALL ENT					
FOR			NUMBER FILED			NUMBER	EX	XTRA		RATE	FEE	7	RATE	FEE	┪.
BASIC FEE							1		380.0	O OF		760.00	7		
TOTAL CLAIMS			83 minus 20=			· Lo3				X\$ 9=		OR		1134	1
INDEPENDENT CLAIMS			minus 3 :			= *				X39=	\top	-		11,24	1
MULTIPLE DEPENDENT CLAIM PRESENT											+	OR		 	1
* If the difference in column 1 is less than zero, enter "0" in column 2									' Į	+130=	_	OR		ļ	4
CLAIMS AS AMENDED - PART II										TOTAL	· L	OR		1894	4
(Column 1) (Column 2) (Column 3)										SMALI	ENTITY	OR		R THAN ENTITY	1
AMENDMENT A		REM AF	AIMS AINING . TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR		RESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI/ TIOMAL PEE	
	Total	. 8	3	Minus	**	83	=			X\$ 9=		OR	X\$18=		
	Independent	•	3	Minus	****	<u> </u>]=			X39=		OR	X78=		1
	FIRST PRESE	NTATIC	N OF MI	ULTIPLE DE	PEND	ENT CLAIM			ľ	+130=	1	1	A260=		1
									L	TOTAL	 	OR	TOTAL		┨
		· (Coli	ımn 1)		<i>(</i> C	column 2)	(0)	olumn 3)	A	DDIT. FEE		OR	ADDIT. FEE		┫.
AMENDMENT B		REM. AF	AIMS AINING TER DMENT		I PR	HIGHEST NUMBER NEVIOUSLY PAID FOR	PF	RESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 8	8	Minus	**	83	=	5		X\$ 9=		OR	X\$18=	66	10
	Independent		<u>5</u>	Minus		<u> </u>	=	2	r	X39=		OR	X78=	168	\ ``
	FIRST PRESE	NTATIO	N OF ML	JLTIPLE DE	PEND	ENT CLAIM			┢	+130=		1	+260=	700	
· *									L	TOTAL		OR	TOTAL		ł
		(Colu	mn 1)		(C	okuma 2)	<i>(</i> C-	luma (1)	AE	DIT. FEE	L	OR ,	ODIT. FEE		
AMENDMENT C	8/12/18	REMA AF	VIMS VINING TER DMENT		PR	olumn 2) IIGHEST IUMBER EVIOUSLY AID FOR	PR	iumn 3) ESENT XTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 4	7	Minus	‡	<i>8</i> 8	=			X\$ 9=		OR	X\$18=	7	
	Independent	. 7	,	Minus	***	5	=		F	X39=	/		X78=	-/-	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										/	OR		/	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OTAL ADDIT. FEE ADDIT. FEE													/		
1	he "Highest Num	ber Previ	ously Pak	For (Total or	Indep	endent) is the	highe	est number	lound	in the app	propriate box	k in colu	mn 1.		

Application or Docket Number